FEC FORM 9 (REV. 12/2007)

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## FEC FORM 9

2018 NOV 10 PM 3: 29

## 24 HOUR NOTICE OF DISBURSEMENTS/OBLIGATIONS FOR ELECTIONEERING COMMUNICATIONS

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1.	Person Making the Disbursements/Obligation	tions		
	HATRIOT MAVELTY MIDUEST			
	(b) Address (number and street) [ check if different than previously reported 500 M STREET, SE SUITE 1/02		2. FEC Identification Number	
	(c) City, State and ZIP Code  WASHINGTON, DC 20003		030000988	
	(d) Name of Employer or Principal Place of Business (e) Occupation		n	
3.	Is This Statement or Amended	4. Covering Period	1 0 7 2008 through	
5.	(a) Date of Public Distribution(s) 27 27 27 88 (b) Communication Title CLOSSERED"			
6.	6. The filer is a(n): (a) Individual (b) Unincorporated Organization (c) Qualified Nonprofit Corporation (11 CFR 114.10)  (d) Corporation, Labor Organization or Qualified Nonprofit Corporation making communications under 11 CFR 114.15  (e) Other, specify:			
7.	If the filer is an individual, unincorporated organization or qualified nonprofit corporation, Yes No No were the disbursements made exclusively from donations to a segregated bank account?			
8.	(a) Name  CLANG VARDGAT  (b) Address (number and street)  30 M STRUCT, St. SUITE 1/02  (c) City, State and ZIP Code  WASHINGTOW, DX. 2003  (d) Name of Employer or Principal Place of Business (e) Occupation.			
	PATRIOT MAJORITY MIDWEST PRESIDENT			
9.	Total Donations This Statement 8000000			
10.	10. Total Disbursements/Obligations This Statement			
Under penalty of perfury, I certify that this statement is true, correctlying complete.  TYPE OR PRINT NAME OF PERSON COMPLETING FORM  DATE 10 NOV 2006			>6A > Nov 206	
	NOTE: Submission of false, error eous or incomplete	information may subject the person signing this stateme	nt to the penalties of 2 U.S.C. §437g.	